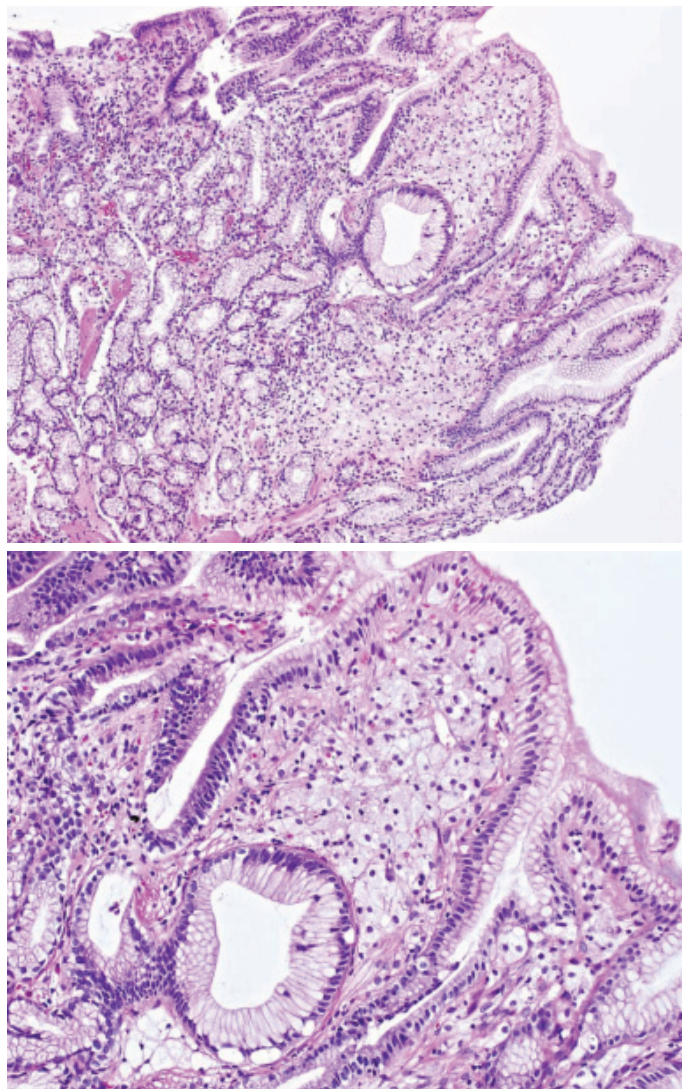


*Klaikaew N***Case 1**

A 59 years old man with obesity and diabetes was evaluated for his history of chronic abdominal discomfort. Esophagogastroduodenoscopy was done and a small yellowish polyp was found in antrum. Section from gastric biopsy showed gastric mucosa with foamy cells in the lamina propria. These cells have small round nuclei with fine and focal indent nuclei (Figure 1-2).

**Figure 1-2.****What is the most likely diagnosis?***(Answer see page 177)*

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Case 2

A 50 years old female presented with dyspepsia. Esophagogastroduodenoscopy was done and found 1.0 cm sessile gastric polyp in body. The polypectomy was performed and pathology revealed gastric polypoid lesion composed of foveolae hyperplasia, hyperplastic and dilated glands, and inflammatory background. Surface ulceration with granulation tissue formation is detected (Figure 3-5).

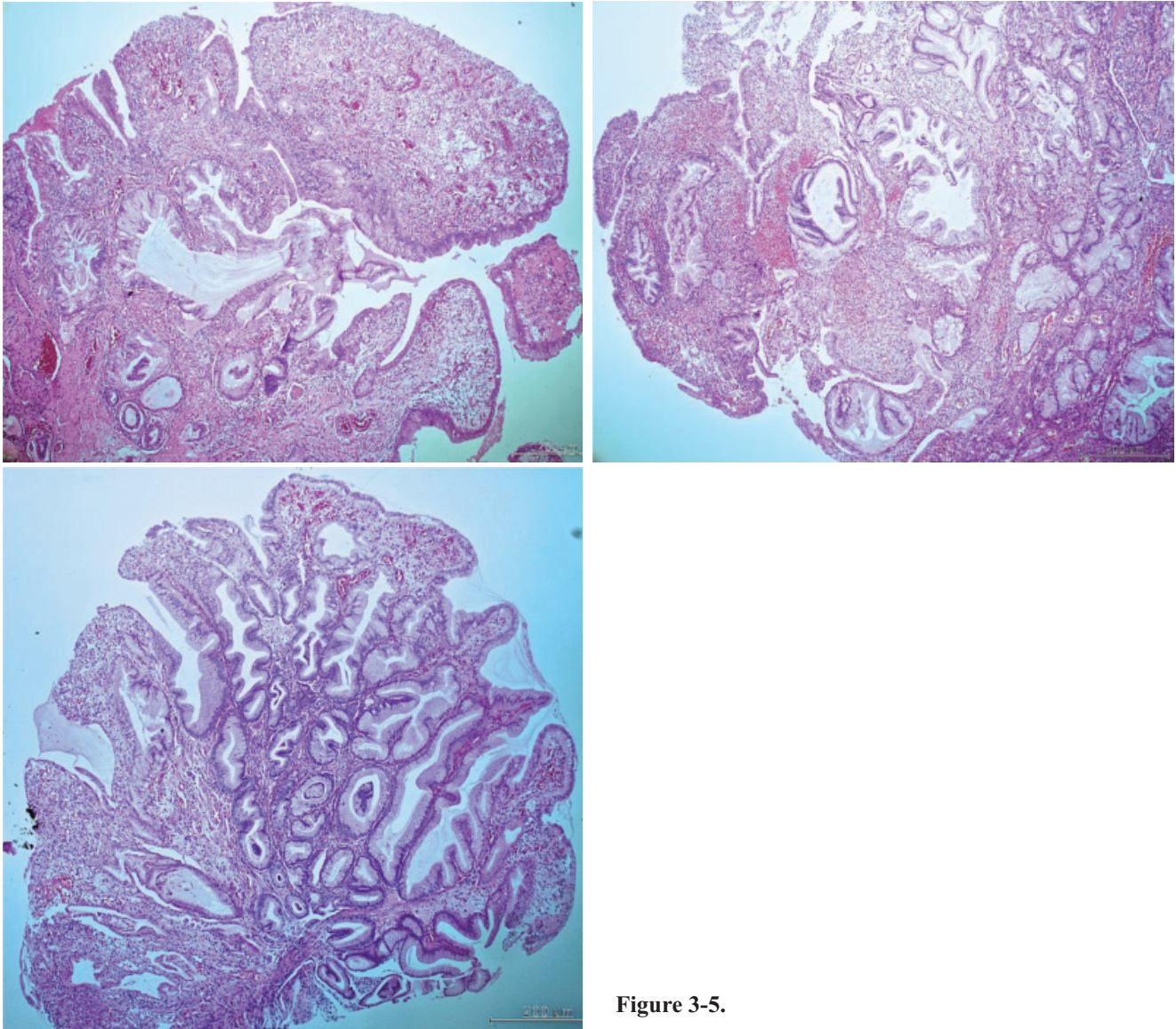


Figure 3-5.

What is the most likely diagnosis ?

(Answer see page 177)

Klaikeaw N

Case 3

A 46 years old female complained with dyspeptic symptom for a year. Esophagogastroduodenoscope was performed and seen multiple round shape small polyps in stomach. Histopathologic section showed gastric polypoid lesion composed of hyperplastic parietal cells with cystic dilatation. Tongue-like appearance of cells is detected (Figure 6-8).

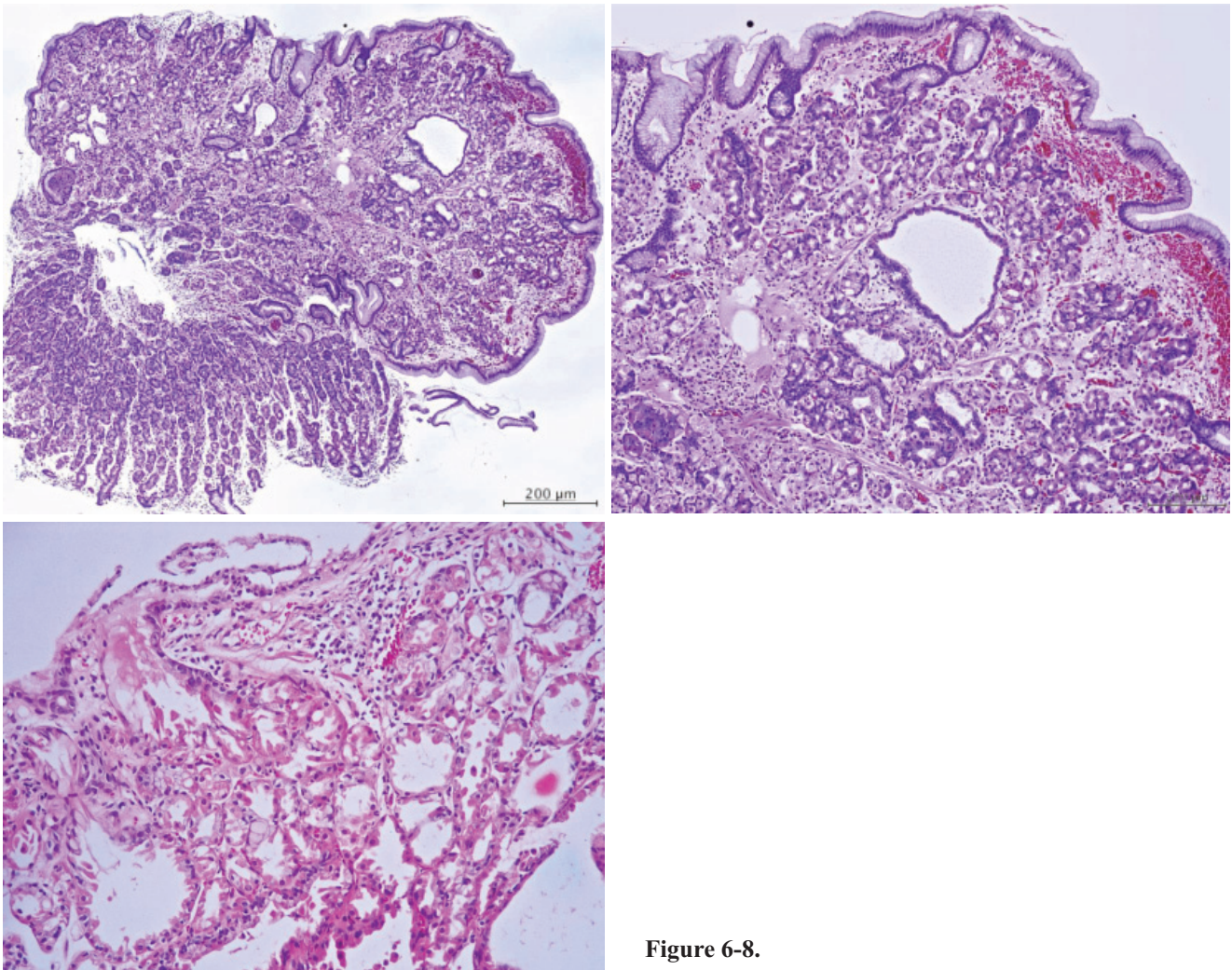


Figure 6-8.

What is the most likely diagnosis?

(Answer see page 177)

Answer for patho corner

- Case 1 = Gastric xanthelasma.
- Case 2 = Gastric inflammatory polyp.
- Case 3 = Fundic gland polyp.